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CONFIRMATION NO. 8157

<b>SERIAL NUMBER</b> 10/669,910	<b>FILING OR 371(c) DATE</b> 09/24/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3761	<b>ATTORNEY DOCKET NO.</b> 121027-199
<b>APPLICANTS</b> Hikari Kawata, Kagawa-ken, JAPAN; Masashi Nakashita, Kagawa-ken, JAPAN; Kaori Yamauchi, Kagawa-ken, JAPAN;				
<b>** CONTINUING DATA *****</b> <i>None</i>				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-283242 09/27/2002 <i>mk</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/19/2003</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Niklaus</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 10
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 35684				
<b>TITLE</b> Disposable body fluid absorbent pad				
<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	